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U.S. Patent and Trademark Office	(703) 872-9306 (Centralized Fax No.)	

FROM: Michael R. Ward - Reg. No. 38,651

DATE: November 23, 2004

Number of pages with cover page:	10
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Preparer of this slip has confirmed that facsimile number given is correct: 9354/lmk2

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RE: Application Serial No. 10/067,620
Title: WALNUT AND RYEGRASS ALLERGENS
Inventors: Bob B. BUCHANAN et al.
Filed: February 4, 2002
Group Art Unit: 1644
Examiner: P. Nolan
Attorney Docket No.: 416272003400

ATTACHED DOCUMENTS:

1. Transmittal (1 page);
2. Fee Transmittal, in duplicate (2 pages);
3. Response to Restriction Requirement (5 pages) and
4. Petition for Extension of Time (1 page).

COMMENTS:

Please see attached documents. Thank you.

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE


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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/087,620
		Filing Date	February 4, 2002
		First Named Inventor	Bob B. BUCHANAN
		Art Unit	1644
		Examiner Name	P. Nolan
Total Number of Pages in This Submission	9	Attorney Docket Number	416272003400

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate for fee processing) - 2 pages <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (Response to Restriction Requirement) - 5 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request - 1 page <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		


SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	MORRISON & FOERSTER LLP (Customer No. 20872) Michael R. Ward - 38,851
Signature	
Date	November 23, 2004

I hereby certify that this correspondence is being sent via Facsimile to the United States Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below:

Dated: November 23, 2004

Signature

 (Leah M. Kjellén)

sf-1818186

PTO/SB/17 (10-04)
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FEE TRANSMITTAL for FY 2005

Effective 1/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 55.00		Complete If Known	
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METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																											
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		3. ADDITIONAL FEES <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>150</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or cash</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td>55.00</td></tr> <tr><td>1252</td><td>430</td><td>2252</td><td>215</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>880</td><td>2253</td><td>430</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,530</td><td>2254</td><td>755</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,090</td><td>2255</td><td>1,040</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>340</td><td>2401</td><td>170</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>340</td><td>2402</td><td>170</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>300</td><td>2403</td><td>150</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to Institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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late filing fee or cash		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		1053	130	1053	130	Non-English specification		1812	2,520	1812	2,520	For filing a request for ex parte reexamination		1804	920*	1804	920*	Requesting publication of SR prior to Examiner action		1805	1,840*	1805	1,840*	Requesting publication of SR after Examiner action		1251	110	2251	55	Extension for reply within first month	55.00	1252	430	2252	215	Extension for reply within second month		1253	880	2253	430	Extension for reply within third month		1254	1,530	2254	755	Extension for reply within fourth month		1255	2,090	2255	1,040	Extension for reply within fifth month		1401	340	2401	170	Notice of Appeal		1402	340	2402	170	Filing a brief in support of an appeal		1403	300	2403	150	Request for oral hearing		1451	1,510	1451	1,510	Petition to Institute a public use proceeding		1452	110	2452	55	Petition to revive - unavoidable		1453	1,330	2453	665	Petition to revive - unintentional		1501	1,370	2501	685	Utility issue fee (or reissue)		1502	490	2502	245	Design issue fee		1503	680	2503	330	Plant issue fee		1460	130	1460	130	Petitions to the Commissioner		1807	50	1807	50	Processing fee under 37 CFR 1.17(e)		1806	180	1806	180	Submission of Information Disclosure Stmt		8021	40	8021	40	Recording each patent assignment per property (times number of properties)		1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))		1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))		1801	790	2801	395	Request for Continued Examination (RCE)		1802	900	1802	900	Request for expedited examination of a design application		Other fee (specify)						*Reduced by Basic Filing Fee Paid					SUBTOTAL (3) (\$) 55.00
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SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Michael R. Ward	Registration No. (Attorney/Agent)	38,651
Signature	<i>Michael R. Ward</i>	Telephone	(415) 268-6237
		Date	November 23 2004

*or number previously paid, if greater; For Reissues, see above

sf-1823657

PTO/SB/17 (10-04)
Approved for use through 7/31/2006. OMB 0651-0033
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Complete if Known

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Filing Date	February 4, 2002
First Named Inventor	Bob B. BUCHANAN
Examiner Name	P. Nolan
Art Unit	1644
Attorney Docket No.	416272003400

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: **03-1952**

Deposit Account Name: **Morrison & Foerster LLP**

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

Duplicate Copy for Fee Processing

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Other fee (specify):

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **55.00**

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	790	2001	395	Utility filing fee	0.00
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$) **0.00**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		Extra Claims		Fee from below		Fee Paid	
16	-20 =	0	x	0	=	0.00	
3	-3 =	0	x	0	=	0.00	
Multiple Dependent		0	x	0	=	0.00	

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	44	Independent claims in excess of 3	
1203	300	2203	150	Multiple dependent claim, if not paid	
1204	88	2204	44	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) **0.00**

** or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	Michael R. Ward	Registration No. (Attorney/Agent)	38,651	Telephone	(415) 268-6237
Signature	<i>Michael R. Ward</i>	Date	November 23, 2004		

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